

**Work Order ID 103830****\*103830\***

Page 1

Tuesday, July 02, 2013 8:46:15 AM

Item ID: D4645-1

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: No Smoking &amp; Fasten Belt Symbols

Start Date: 7/2/2013 Start Qty: 2.00

**\*2\***

Required Date: 7/19/2013 Req'd Qty: 2.00

**\*2\***

Cust Item ID:

Customer:

Reference:

Run Start

**\*NR1\***Approvals: Process Plan: CLDate: 13/07/02 Tooling:

Date:

Stop

**\*NR2\***

QC:

Date:

SPC (Y/N):

Date:

Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

Draw Nbr

Revision Nbr

D4645

A

100

0.00

**\*100\***

Purchasing

Purchasing

Memo

Issue P/O:

Purchase Part Number: IS5083-3

Supplier: BIRK AEROSYSTEM CORPORATION

Certificate of conformity is required

0.00

110

Receive &amp; Inspect for Damage &amp; Mat'l Certs

0.00

**\*110\***

Packaging

Packaging

Memo

0.00

CL 13/07/02 (2)CLSP  
13-8-16.

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 103830

\*103830\*

Page 2

Tuesday, July 02, 2013 8:46:15 AM

Item ID: D4645-1

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: No Smoking & Fasten Belt Symbols

Start Date: 7/2/2013 Start Qty: 2.00 \*2\*

Cust Item ID:

Required Date: 7/19/2013 Req'd Qty: 2.00 \*2\*

Customer:

Reference:

Run Start \*NR1\*

Approvals: Process Plan: Date: Tooling: Date:

Stop \*NR2\*

QC: Date: SPC (Y/N): Date:

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

120

QC6- Inspect dimensions to drawing

0.00

\*120\*

QC

Memo

0.00

Quality Control

27  
13.8.16

8

130

Identify as per dwg & Stock Location: 85117 0.00

\*130\*

Packaging

Memo

0.00

Packaging

8x 13-8-16

140

QC21- Final Inspection - Work Order Release 0.00

\*140\*

QC

Memo

0.00

Quality Control

MJS 13-08-16

MF 13-08-16

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Picklist Print

Tuesday, July 02, 2013 8:46:15 AM

Page 1

Work Order ID: 103830

Parent Item: D4645-1

Parent Item Name: No Smoking & Fasten Belt Symbols

Start Date: 7/2/2013

Required Date: 7/19/2013

Start Qty: 2.00

Required Qty: 2.00

Comments: Ipp RevA 12.05.31 new issue EC verified by:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
IS5083-3 No Smoking & Fasten Belt Symbols		Purchased	No			110	Each	0.0000	1	28 8x 5013-8-16			

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

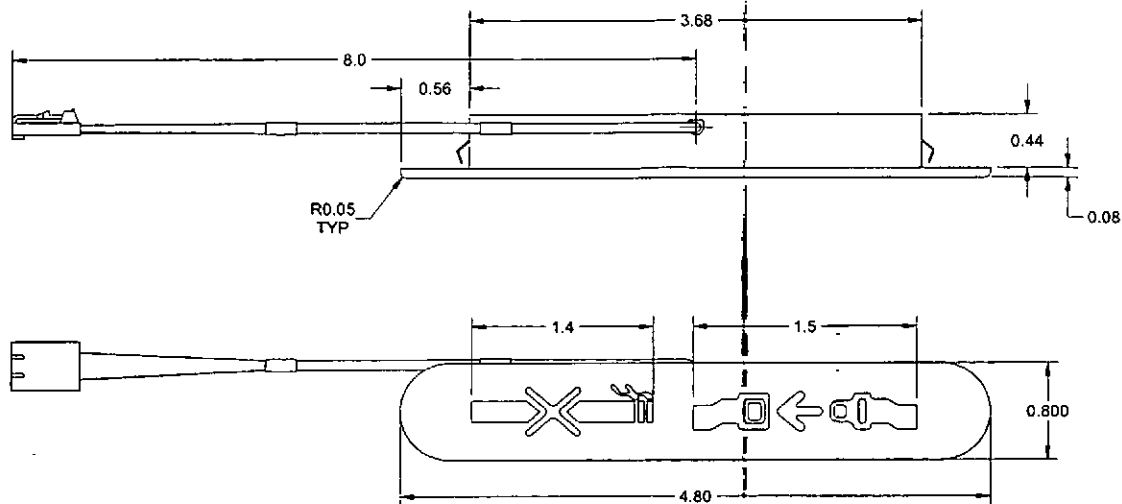
QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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Doc/Data											
Equip/Tooling											
Operator											
Material											
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Other											
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Supplier											
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FAULT CATEGORY				
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# SPECIFICATION CONTROL DRAWING



DART PART NUMBER	DESCRIPTION	VENDOR	VENDOR PART NUMBER	WIRE SIZE	CONNECTOR TYPE	COLOR	WEIGHT (lbs)
D4645-1	NO SMOKING & FASTEN BELT LIGHT	BIRK AEROSPACE CORPORATION	IS5083-3	24 GA	3 CIRCUIT MOLEX PLUG 51006-0300	WHITE SAND	0.05

## D4645-X INFORMATION SIGN

CL 13/07/02  
W10'. 1038 30

### NOTES:

- 1) MATERIAL: SEE TABLE
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: PER TABLE

A	NEW ISSUE	RF	12.07.25
REV.	DESCRIPTION	BY	DATE
DESIGN	RF		
DRAWN	RF		
CHECKED	RF		
MFG. APPR.	RF		
APPROVED	RF		
DE APPR.	RF		
DATE	12.07.25		

**DART AEROSPACE LTD**  
HAWKESBURY, ONTARIO, CANADA  
DRAWING NO. **D4645**  
REV. A  
SHEET 1 OF 1  
TITLE **INFORMATION SIGN**  
SCALE NTS

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NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

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☐ Ovalized  
☐ Over/Under tolerance  
☐ Part Incorrect  
☐ Part Lost/Missing  
☐ Part Moved  
☐ Positioned Wrong  
☐ Power Loss/Surge

☐ Pressure/Forced  
☐ Temperature/Cure  
☐ Weld  
☐ Wrong Stock Pulled  
☐ Other



**BAC****BIRK AEROSYSTEMS CORPORATION**

14321 Commerce Drive

Garden Grove, California 92843

Telephone: (714) 554-9782 Telefax: (714) 554-3659

DATE: 08/15/13

CUSTOMER PO: PO20394

SHIPPER NO.: DAR130815

**CERTIFICATE OF CONFORMITY / PACKING LIST**

SHIP TO: **DART AEROSPACE LTD**  
**1270 ABERDEEN**  
**HAWKESBURY, ON K6A 1K7**  
**CANADA**

PO ITEM	PRODUCT NO.	DESCRIPTION	QUANTITY		LOT CODE	LOT QTY	SERIAL NO.
			ORDERED	SHIPPED			
2	IS5083-3	No Smoking & Fasten Seat Belt Symbols (Rev. C)	8	8	1308466 MFG: 1333	8	-
		<b>VALUE FOR CUSTOMS:</b> <b>\$969.44 USD</b> <b>Country of Manufacture:</b> <b>United States</b>					

CLAIMS FOR SHORTAGES OR MATERIAL DISCREPANCY MUST BE MADE WITHIN 15 DAYS AFTER DATE SHIPPED.

**CERTIFICATE OF CONFORMANCE:** THIS IS TO CERTIFY THAT THE PARTS FURNISHED ON THIS ORDER HAVE BEEN FUNCTIONALLY TESTED IN ACCORDANCE WITH STANDARD PROCEDURES DEFINED BY BAC. MATERIAL AND/OR PARTS FURNISHED IN THIS ORDER HAVE BEEN MANUFACTURED IN ACCORDANCE WITH ALL APPLICABLE INSTRUCTIONS AND SPECIFICATIONS. PHYSICAL AND CHEMICAL DATA WHICH PERTAINS TO THIS ORDER ARE AVAILABLE FOR INSPECTION.

QTY VERF

**FEDEX P1 COLLECT****2#**  
**QUALITY ASSURANCE MANAGER**





Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO20394

Purchase Order Date 02/07/2013

PO Print Date 08/07/2013

Page Number 1 of 2

Order From :

VU-BIR001

BIRK AEROSYSTEMS CORPORATION  
14321 COMMERCIAL DRIVE  
GARDEN GROVE, CALIFORNIA 92843

Ship To : DART AEROSPACE LTD

1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

Contact Name

Vendor Phone 714-554-9782

Ship To Contact

Ship To Phone

Ship Via: FedEx PI collect

Ship Acct:

Buyer

Chantal Lavoie

Customer POID

Customer Tax #

10127-2607

Terms

Net 30

Currency

USD

FOB

Destination-Collect

REVISED

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	List Price	Disc %	Discounted Unit Price	Extended Price
1	PC7041-1 AS PER DWG D4646 REV. A B103832	Plenum Cap Assembly	13/08/2013 Yes 13/08/2013		84.00 Each				\$586.32
									Line Total: \$586.32
2	IS5083-3 AS PER DWG D4645 REV. A B103830	No Smoking & Fasten Belt Symbols	13/08/2013 Yes 13/08/2013		8.00 Each				\$969.44
									Line Total: \$969.44
3	AV264301-2 AS PER DWG D4652 REV. B B103831	Air Valve, 1.16 ID Disk Type	13/08/2013 Yes 13/08/2013		192.00 Each				\$7,814.40

Note:

08/07/2013

